



**Lansing Parks and Recreation's
2016 Summer Kids Camp Waiver Form**

SITE : _____

Camp Week(s) Attending: ☐ **A** ☐ **B** ☐ **C** ☐ **D** ☐ **E** ☐ **F** ☐ **G** ☐ **H**

Pre Care: ____ Yes ____ No

Post Care: ____ Yes ____ No

Date Received: _____
T-Shirt _____
Handbook _____

Name of Participant: _____ Age at Camp: _____

(Separate form required for each child)

Parent Information

Parent Name 1	Parent Name 2
Address	Address
City, State and Zip Code	City, State and Zip Code
Home Phone/Cell Phone/Work Phone	Home Phone/Cell Phone/Work Phone
Email Address:	Email Address:

Persons other than Parent to Notify in an Emergency Situation, when the Parent is not available:

Name	Phone Number
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Medical or Behavioral Needs or Other Important Information (For Special Accommodations please complete additional Health Waiver Form)

Does your child have any Allergies, Medications, Special Needs, Behaviors or other Conditions or Concerns we should be aware of?

For some grants and partnerships we need to report certain demographic information if you are willing to share your child's : School _____ Race/Ethnicity _____

LIABILITY RELEASE

I hereby release the City of Lansing of all liability for damages or injuries sustained by myself or my child while engaging in the activity

Signature of Parent/Guardian: _____ **Date:** _____

EMERGENCY TREATMENT WAIVER

The undersign, as parent/legal guardian of _____, a minor, does hereby give permission to the Lansing Parks and Recreation Department staff to secure routine and emergency medical treatment for the above named minor for injuries received or illness appearing while he/she is engaged in any recreational program sponsored by the City of Lansing. I further understand and agree that any treatment authorized by this consent will be rendered only if the City of Lansing, or its agent, is unable to contact a parent/guardian for the minor, and it is the judgment of the attending physician that emergency medical treatment is advisable for the welfare of the minor. I further state that I have carefully read the foregoing, understand the contents thereof, and sign it as my own free act.

Signature of Parent/Guardian: _____ **Date:** _____

WALKING PERMISSION FORM

I am giving my child _____ permission to walk to and/or from the Lansing Parks and Recreation camp program. I assume the responsibility to assure that my child knows and will follow traffic safety rules. I hereby release Lansing Parks and Recreation, and any and all of their representatives or agents from any and all claims or liability arising from, or related to, my child's travel to and/or from the Lansing Parks and Recreation camp program.

Parent/Guardian Signature: _____ Print Name: _____ Date: _____

-OR-

AUTHORIZED PICK UP LIST

Names of persons other than authorized person to whom camper may be released: _____

Parent/Guardian Signature: _____ Print Name: _____ Date: _____